



60 East 56th Street, 9th Flr,
New York, NY 10022
Tel: 212.758.3283
Fax: 212.758.3453
www.eagletelco.com

September 9, 2002

Jeff Henderson
National Exchange Carrier Association

This is in response to your email message regarding missing pages 4-5 from FCC Form 499-A. Attached are those missing pages.

Please, note the original message you sent me with Form 499-A for 2001, pages 4-5 were missing.

Thank you,

A handwritten signature in black ink that reads "Franco". The signature is written in a cursive, flowing style. Below the signature, the name "Franco Oliva" is printed in a standard sans-serif font.

Attachments

Block 3: Carrier's Carrier Revenue Information

301	Filer 499 ID [from Line 101]	821256			
302	Legal name of reporting entity [from Line 102]	EAGLE COMMUNICATIONS, INC.			
Report billed revenues for January 1 through December 31, 2000. Do not report any negative numbers. Dollar amounts may be rounded to the nearest thousand dollars. However, report all amounts as whole dollars.		Total Revenues (a)	If breakouts are not book amounts, enter whole percentage estimates		Breakouts
See instructions regarding percent interstate & international.			Interstate (b)	International (c)	Interstate Revenues (d)
Revenues from Services Provided for Resale by Other Contributors to Federal Universal Service Support Mechanisms					
<u>Fixed local service</u>					
303	Monthly service, local calling, connection charges, vertical features, and other local exchange service including subscriber line and PICC charges to IXCs				
a	Provided as unbundled network elements (UNEs)				
b	Provided under other arrangements				
304	Per-minute charges for originating or terminating calls				
a	Provided under state or federal access tariff				
b	Provided as unbundled network elements or other contract arrangement				
305	Local private line & special access service				
306	Payphone compensation from toll carriers				
307	Other local telecommunications service revenues				
308	Universal service support revenues received from Federal or state sources				
<u>Mobile services (including wireless telephony, paging & messaging, and other mobile services)</u>					
309	Monthly, activation, and message charges except toll				
<u>Toll services</u>					
310	Operator and toll calls with alternative billing arrangements (credit card, collect, international call-back, etc.)				
311	Ordinary long distance (direct-dialed MTS, customer toll-free 800/888 service, "10-10" calls, associated monthly account maintenance, PICC pass-through, and other switched services not reported above)				
312	Long distance private line services				
313	Satellite services				
314	All other long distance services				

PERSONS MAKING WILLFUL FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 18 U.S.C. §1001

Block 4: End-User and Non-Telecommunications Revenue Information

401	Legal name of reporting entity [from Line 102]	821256 EAGLE COMMUNICATIONS, INC.		
402	Report billed revenues for January 1 through December 31, 2000 the nearest thousand dollars. However, report all amounts as whole dollars. Do not report any negative numbers. Dollar amounts may be rounded to the nearest hundred dollars.	See instructions regarding percent interstate & international.		
403	Revenues from All Other Sources (end-user telecom. & non-telecom.) Surcharges or other amounts on bills identified as recovering State or Federal universal service contributions	Total Revenues (a)		
		Interstate Revenues (b)	International Revenues (c)	Interstate Revenues (d)
		amounts, enter whole percentages estimates		
		If breakouts are not book		
		Breakouts		
404	Fixed local services Monthly service, local calling, connection charges, vertical features, and other local exchange service charges except for federally tariffed subscriber line charges and PICC charges	4,163,454	2.4	0
405	PICC charges levied by a local exchange carrier on a no-PIC customer and Tariffed subscriber line charges	0		
406	Local private line and special access service	0		
407	Payphone coin revenues (local and long distance)	0		
408	Other local telecommunications service revenues	0		
409	Monthly and activation charges	0		
410	Message charges including roaming, but excluding toll charges	0		
411	Toll services Prepaid calling card (including card sales to customers and non-carrier distributors) reported at face value of cards	0		
412	International calls that both originate and terminate in foreign points	0	0%	100%
413	Operator and toll calls with alternative billing arrangements (credit card, collect, international call-back, etc.) other than revenues reported on Line 412	0		
414	Ordinary long distance (direct-dialed MTS, customer toll-free 800/888 service, "10-10" calls, associated monthly account maintenance, PICC pass-through, and other switched services not reported above)	0		
415	Long distance private line services	0		
416	Satellite services	0		
417	All other long distance services	0		
418	Information services, inside wiring maintenance, billing and collection customer premises equipment, published directory, dark fiber, internet access, cable TV program transmission, foreign carrier operations, and non-telecommunications revenues (See instructions.)	0		
419	Gross billed revenues from all sources [incl. reseller & non-telecom.] [Lines 303 through 314 plus Lines 403 through 418]	0		
420	Universal service contribution bases [Lines 403 through 411 & Lines 413 through 417]	4,163,454		
				102,209
				0

PERSONS MAKING WILLFUL FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 18 U.S.C. §1001

MODE = MEMORY TRANSMISSION

START=NOV-05 16:26

END=NOV-05 16:29

FILE NO. = 041

STN NO. COM RBR NO. STATION NAME/TEL. NO. PAGES DURATION

001 OK 1703537419 008/008 00:03'10"

-EAGLE COMMUNICATIONS

*****-***** - ***** - 212 751 8934-*****

2001 FCC Form 499-A Telecommunications Reporting Worksheet

Approval by OMB

3060-0855

Block 1: Contributor Identification Information

101 Filer 499 ID [If you don't know your number, contact the administrator at (877)-590-4400.

102 Legal name of reporting entity

103 IRS employer identification number

104 Name telecommunications service provider is doing business as

105 Principal communications business (Check the one that best describes the reporting entity - see directions. Check one box only.)

106 CAP/LEC

107 Local Reseller

108 Private Service Provider

109 Shared-Tenant Service Provider

110 Other Local, Other Mobile or Other Toll is checked

111 Other Local

112 Other Mobile

113 Toll Reseller

114 Satellite

115 Paging & Messaging

116 Incumbent LEC

117 Payphone Service Provider

118 Interexchange Carrier (IXC)

119 Describe carrier type / services provided:

120 Holding company (If all affiliated companies should show same name here)

121 Registration Number (FRI) (https://equifast2.fcc.gov/comreg/Consume.html)

122 Assistance, contact the CUBS help desk at 877-480-3241 or CUBS@fcc.gov

123 Management company (If carrier is managed by another entity)

124 Complete mailing address of reporting entity's

125 Complete business address for customer inquiries and complaints

126 (If different from address entered on Line 109)

127 Telephone number for customer inquiries and complaints (If toll-free number (available)

128 All trade names that you have used in the past 3 years in providing telecommunications

129 services. This should include all names by which you are identified on customer

130 Use an additional sheet if necessary. Each reporting entity must provide all names used for carrier activities.

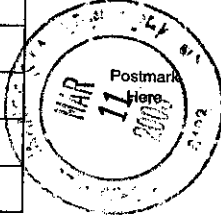
131 IS MAKING WILLFULLY FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 18 U.S.C. 1014.

132 FCC Form 499-A

133 February 2001

7002 2030 0001 7796 8068

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$ 1.06
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.11



Sent To	
USAC	
Street, Apt. No., or PO Box No. 2120 L STREET, NW SUITE 600	
City, State, ZIP+4 WASH. D.C. 20037	

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

USAC
2120 L STREET, NW
SUITE 600
WASHINGTON, DC 20037

2. Article Number
(Transfer from service label)

7002 2030 0001 7796 8068

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X A. Williams

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

A. Williams

C. Date of Delivery

3/14/03

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below: ☒ No

3. Service Type

- ☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☒ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes



60 East 56th Street, 9th Flr
New York, NY 10022
Tel: 212.758.3283
Fax: 212.758.3453
www.eagletelco.com

September 5, 2002

NECA
80 South Jefferson Road
Whippany, New Jersey 07981

To Whom It May Concern:

Attached is the revised FCC Form 499-A for the period of April 2000 through March 2001. The previous FCC Form 431 incorrectly reported the Local Exchange service revenues as Interstate Access. This revised 499-A form correctly reports the Local Service and the Interstate revenues in the appropriate columns on line 511.

If you have any questions, I can be reached at 212.758.3283 ext. 3061

Sincerely,

Francesco S. Oliva
Manager – Regulatory Affairs

Attachment

2001 FCC Form 499-A Telecommunications Reporting Worksheet

Approval by OMB
3060-0855

>>> Please read instructions before completing. <<<

Annual Filing -- due April 1.

Block 1: Contributor Identification Information

During the year, carriers must refile blocks 1, 2 and 6 if there are any changes in Lines 104 or 112. See instructions.

101 Filer 499 ID [If you don't know your number, contact the administrator at (973)-560-4400.

If you are a new filer, leave blank and a Filer 499 ID will be assigned to you.] 821256

102 Legal name of reporting entity

Eagle Communications, Inc.

103 IRS employer identification number

13-3512006

104 Name telecommunications service provider is doing business as

105 Principal communications business [Check the one that best describes the reporting entity -- see directions. Check one box only.]

☒ CAP/CLEC

☐ Cellular/PCS/SMR (wireless telephony incl. by resale)

☐ Incumbent LEC

☐ Interexchange Carrier (IXC)

☐ Local Reseller

☐ Operator Service Provider (OSP)

☐ Paging & Messaging

☐ Payphone Service Provider

☐ Prepaid Card

☐ Private Service Provider

☐ Satellite

☐ Shared-Tenant Service Provider

☐ SMR (dispatch)

☐ Toll Reseller

☐ Wireless Data

If Other Local, Other Mobile or Other Toll is checked, Other Local

☐ Other Mobile

☐ Other Toll

describe carrier type / services provided:

106 Holding company 2F (All affiliated companies should show same name here)

107 Registration Number (FRN) [https://guilfoss2.fcc.gov/cores/CoresHome.html] 0004294823

For assistance, contact the CORES help desk at 877-480-3201 or CORES@fcc.gov

108 Management company [if carrier is managed by another entity]

109 Complete mailing address of reporting entity's corporate headquarters

142 East 39th Street
New York, NY 10016

110 Complete business address for customer inquiries and complaints [if different from address entered on Line 109]

111 Telephone number for customer inquiries and compl. [Toll-free number if available] () -

112 All trade names that you have used in the past 3 years in providing telecommunications services. This should include all names by which you are identified on customer contracts.

a

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Use an additional sheet if necessary. Each reporting entity must provide all names used for carrier activities.

IS MAKING WILLFULLY FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 18 U.S.C. 1001

FCC Form 499-A
February 2001

2001 FCC Form 499-A Telecommunications Reporting Worksheet

Page 2

Block 2-A: Personal Contact Information

201 Filer 499 ID [from Line 101]	821256
202 Legal name of reporting entity [from Line 102]	Eagle Communications, Inc.
203 Person who completed this worksheet	Francesco S. Oliva
204 Telephone number of this person	() - 212-758-3283 ext. 3061
205 Fax number of this person	() - 212-758-3453
206 E-mail of this person	foliva@eagle.net
207 Corporate office, attn. name, and mailing address to which future Telecommunications Reporting Worksheets should be sent	Eagle Communications, Inc. 142 East 39th Street New York, NY 10016
208 Billing address and billing contact person: [an administrators will send bills for contributions to this address. Please attach a written request for alternative billing arrangements.]	Same As Above

Block 2-B: Agent for Service of Process

 All carriers must complete Lines 209 through 213
 During the year, carriers must refile Blocks 1, 2 and 6 if there are any changes in this section. See Instructions.

209 D.C. Agent for Service of Process per 47 U.S.C. 413	Corporation Service Company (CSC)
210 Telephone number of D.C. agent	800-927-9800
211 Fax number of D.C. agent	() -
212 E-mail of D.C. agent	
213 Complete business address of D.C. agent for hand service of documents	1090 Vermont Avenue, NW, 4th Floor Washington, DC 20005
214 Alternate Agent for Service of Process (optional)	
215 Telephone number of alternate agent	() -
216 Fax number of alternate agent	() -
217 E-mail of alternate agent	
218 Complete business address of alternate agent for hand service of documents	

IS MAKING WILLFULLY FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 18 U.S.C. 1001

 FCC Form 499-A
 February 2001

2001 FCC Form 499-A Telecommunications Reporting Worksheet

Page 3

Block 2-C: FCC Registration Information:

Carriers that provide interstate service must complete Lines 219 through 225
During the year, carriers must refile Blocks 1, 2 and 6 if there are any changes in this section. See Instructions.

219 Chief Executive Officer (or, a similar senior-level official if the filing entity does not have such a position)

Kent Charugundla

220 Business address of individual named above

check if same as Line 109 ☒

221 Chairman (or, a similar senior-level official if the filing entity does not have such a position or if the Chairman also is listed on Line 219)

Kent Charugundla

222 Business address of individual named above

check if same as Line 109 ☒

223 President (or, a similar senior-level official if the filing entity does not have such a position or if the President also is listed on Line 219 or on Line 221)

Harold Maddela

224 Business address of individual named above

check if same as Line 109 ☒

225 Indicate in which jurisdictions the filing entity provides telecommunications services. Include jurisdictions in which service was provided in the past 15 months; jurisdictions in which service is likely to be provided in the next 12 months.

<input type="checkbox"/> Alabama	<input type="checkbox"/> Kentucky	<input type="checkbox"/> Ohio
<input type="checkbox"/> Alaska	<input type="checkbox"/> Louisiana	<input type="checkbox"/> Oklahoma
<input type="checkbox"/> American Samoa	<input type="checkbox"/> Maine	<input type="checkbox"/> Oregon
<input type="checkbox"/> Arizona	<input type="checkbox"/> Maryland	<input type="checkbox"/> Pennsylvania
<input type="checkbox"/> Arkansas	<input type="checkbox"/> Massachusetts	<input type="checkbox"/> Puerto Rico
<input type="checkbox"/> California	<input type="checkbox"/> Michigan	<input type="checkbox"/> Rhode Island
<input type="checkbox"/> Colorado	<input type="checkbox"/> Midway Atoll	<input type="checkbox"/> South Carolina
<input type="checkbox"/> Connecticut	<input type="checkbox"/> Minnesota	<input type="checkbox"/> South Dakota
<input type="checkbox"/> Delaware	<input type="checkbox"/> Mississippi	<input checked="" type="checkbox"/> Tennessee
<input type="checkbox"/> District of Columbia	<input type="checkbox"/> Missouri	<input type="checkbox"/> Texas
<input checked="" type="checkbox"/> Florida	<input type="checkbox"/> Montana	<input type="checkbox"/> Utah
<input checked="" type="checkbox"/> Georgia	<input type="checkbox"/> Nebraska	<input type="checkbox"/> U.S. Virgin Islands
<input type="checkbox"/> Guam	<input type="checkbox"/> Nevada	<input type="checkbox"/> Vermont
<input type="checkbox"/> Hawaii	<input type="checkbox"/> New Hampshire	<input type="checkbox"/> Virginia
<input type="checkbox"/> Idaho	<input type="checkbox"/> New Jersey	<input type="checkbox"/> Wake Island
<input checked="" type="checkbox"/> Illinois	<input type="checkbox"/> New Mexico	<input type="checkbox"/> Washington
<input type="checkbox"/> Indiana	<input checked="" type="checkbox"/> New York	<input type="checkbox"/> West Virginia
<input type="checkbox"/> Iowa	<input checked="" type="checkbox"/> North Carolina	<input type="checkbox"/> Wisconsin
<input type="checkbox"/> Johnston Atoll	<input type="checkbox"/> North Dakota	<input type="checkbox"/> Wyoming
<input type="checkbox"/> Kansas	<input type="checkbox"/> Northern Mariana Islands	

IS MAKING WILLFULLY FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 18 U.S.C. 1001

FCC Form 499-A
February 2001

2001 FCC Form 499-A Telecommunications Reporting Worksheet

Page 6

Block 5: Additional Revenue Breakouts

501 Filer 499 ID (from Line 101)	821216
502 Legal name of reporting entity (from Line 102)	Eagle Communications, Inc.

Most filers must contribute to LNP administration and must provide the percentages requested in Lines 503 through 510. Filing entities that use Line 603 to certify that they are exempt from this requirement need not provide this information.

Percentage of revenues reported in Block 3 and Block 4 billed in each region of the country. Round or estimate to nearest whole percentage. Enter 0 if no service was provided in the region.

		Block 3 Carrier's Carrier (a)	Block 4 End-User Telecom. (b)
503 Southeast:	Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, Puerto Rico, South Carolina, Tennessee, and U.S. Virgin Islands	82 %	%
504 Western:	Alaska, Arizona, Colorado, Idaho, Iowa, Minnesota, Montana, Nebraska, New Mexico, North Dakota, Oregon, South Dakota, Utah, Washington, and Wyoming	0 %	%
505 West Coast:	California, Hawaii, Nevada, American Samoa, Guam, Johnston Atoll, Midway Atoll, Northern Mariana Islands, and Wake Island.	0 %	%
506 Mid-Atlantic:	Delaware, District of Columbia, Maryland, New Jersey, Pennsylvania, Virginia, and West Virginia	0 %	%
507 Mid-West:	Illinois, Indiana, Michigan, Ohio, and Wisconsin	3 %	%
508 Northeast:	Connecticut, Maine, Massachusetts, New Hampshire, New York, Rhode Island, and Vermont	15 %	%
509 Southwest:	Arkansas, Kansas, Missouri, Oklahoma, and Texas	0 %	%
510 Total	[Percentages must add to 0 or 100]	100 %	%

511 Revenues from resellers that do not contribute to Universal Service support mechanisms are included in Block 4, Line 420 but may be excluded from a filer's TRS, NANPA, LNP, and FCC common carrier regulatory fee contribution bases. To have these amounts excluded, the filer has the option of identifying such revenues below.

	(a)	(b)
	Total Revenues	Interstate and International
Revenues from resellers that do not contribute to Universal Service	\$ 4,163,454.00	\$ 102,209.00

IS MAKING WILLFULLY FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 18 U.S.C. 1001.

FCC Form 499-A
February 2001

2001 FCC Form 499-A Telecommunications Reporting Worksheet

Page 7

Block 6: CERTIFICATION: to be signed by an officer of the filer

601 Filer 499 ID [from Line 101]

821256

602 Legal name of reporting entity [from Line 102]

Eagle Communications, Inc.

Section IV of the instructions provides information on which types of reporting entities are required to file for which purposes. Any entity claiming to be exempt from one or more contribution requirements should so certify below and attach an explanation. [The Universal Service Administrator will determine which entities meet the de minimis threshold based on information provided in Block 4, even if you fail to so certify, below.]

603 I certify that the reporting entity is exempt from contribu

Universal Service



TRS



NANPA



LNP Administration



Provide explanation below:

604 I certify that the revenue data contained herein are privileged and confidential and that public disclosure of such information would likely cause substantial harm to the competitive position of the company. I request nondisclosure of the revenue information contained herein pursuant to Sections 0.459, 52.17, 54.711 and 64.604 of the Commission's Rules.



I certify that I am an officer of the above-named reporting entity, that I have examined the foregoing report and, to the best of my knowledge, information and belief, all statements of fact contained in this Worksheet are true and that said Worksheet is an accurate statement of the affairs of the above-named company for the previous calendar year. In addition, I swear, under penalty of perjury, that all requested identification registration information has been provided and is accurate.

605 Signature

Harold Maddela

606 Printed name of officer

Harold Maddela

607 Position with reporting entity

President

608 Date

September 5, 2002

609 This filing is:



Original filing



Revised filing

Do not mail checks with this form. Send this form to: Form 499 c/o NECA, 80 South Jefferson Road, Whippany New Jersey, 07981

For additional information regarding this worksheet contact: Telecommunications Reporting Worksheet information: (973) 560-4400 or via e-mail: Form499@fcc.gov

IS MAKING WILLFULLY FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 18 U.S.C. 1001

FCC Form 499-A
February 2001

7595 2254 9000 0860 2002

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$.60
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	—
Total Postage & Fees	\$ 4.65

Postmark Here

Sent To **NECA**

Street, Apt. No.,
or PO Box No. **80 SOUTH JEFFERSON ROAD**

City, State, ZIP+4 **WHIPPANY, NJ 07981**

PS Form 3800, April 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Received by (Please Print Clearly) B. Date of Delivery</p> <p>C. Signature <i>[Signature]</i> <i>SEP 2 1992</i></p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <p>NECA 80 SOUTH JEFFERSON ROAD WHIPPANY, NJ 07981</p> <p><i>% FORM 499</i></p>		<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7002 0860 0006 2254 7595</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

2001 FCC Form 499-A Telecommunications Reporting Worksheet

Page 7

Block 6: CERTIFICATION: to be signed by an officer of the filer

601 Filer 499 ID [from Line 101]

821256

602 Legal name of reporting entity [from Line 102]

Eagle Communications, Inc.

Section IV of the instructions provides information on which types of reporting entities are required to file for which purposes. Any entity claiming to be exempt from one or more contribution requirements should so certify below and attach an explanation. [The Universal Service Administrator will determine which entities meet the de minimis threshold based on information provided in Block 4, even if you fail to so certify, below.]

603 I certify that the reporting entity is exempt from contribu

Universal Service

☐

TRS

☐

NANPA

☐

LNP Administration

☐

Provide explanation below:

604

I certify that the revenue data contained herein are privileged and confidential and that public disclosure of such information would likely cause substantial harm to the competitive position of the company. I request nondisclosure of the revenue information contained herein pursuant to Sections 0.459, 52.17, 54.711 and 64.604 of the Commission's Rules.

☐

I certify that I am an officer of the above-named reporting entity, that I have examined the foregoing report and, to the best of my knowledge, information and belief, all statements of fact contained in this Worksheet are true and that said Worksheet is an accurate statement of the affairs of the above-named company for the previous calendar year. In addition, I swear, under penalty of perjury, that all requested identification registration information has been provided and is accurate.

605 Signature

606 Printed name of officer

Harold Maddela

607 Position with reporting entity

President

608 Date

609 This filing is:

☐

Original filing

☒

Revised filing

Do not mail checks with this form. Send this form to: Form 499 c/o NECA, 80 South Jefferson Road, Whippany New Jersey, 07981

For additional information regarding this worksheet contact: Telecommunications Reporting Worksheet information: (973) 560-4400 or via e-mail: Form499@fcc.gov

IS MAKING WILLFULLY FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 78 U.S.C. 101

FCC Form 499-A
February 2001



60 East 56th Street, 9th Flr
New York, NY 10022
Tel: 212.758.3283
Fax: 212.758.3453
www.eagletelco.com

August 19, 2002

Federal Communications Commissions
CORES Administrator
Room: CY-C140
445 12th Street, SW
Washington, DC 20554

To Whom It May Concern:

Enclosed is Eagle Communications, Inc. (Filer No. ID 821256) revised Form 159-W reflecting changes made by Form 499-A resubmitted on July 9, 2002. The overall payment fee is still \$0.00.

If you disagree with the revised figures, please advice at your early convenience.

Sincerely,

Francesco S. Oliva
Manager - Regulatory Affairs
212.758.3283 ext. 3061

Attachment

Federal Communications Commission

Interstate Telephone Service Provider Regulatory Fee

Approved by OMB

3060-0949

This packet contains the 2002 FCC Regulatory Fee Worksheet Form 159-W and a Remittance Advice Form 159. The FCC Form 159-W worksheet below has been completed using information from your previously submitted FCC Form 499-A. If any of this information is incorrect, please enter the correct figures on the blank worksheet enclosed and recalculate your regulatory fee. If all FCC regulatory fees that you owe total less than \$10, you are not required to file or remit payment. Otherwise, remit the fee either with this page, or with a completed Remittance Advice Form 159 and a correct Regulatory Fee Worksheet FCC 159-W.

Attention:

Filing must be received by September 25, 2002. See Public Notice.

3388 Eagle Communications, Inc.
60 E. 56th St.
9th Floor
New York, NY 10022

If the revenue information on this page is correct, you may sign in Block (30) and submit this page in lieu of a separate Remittance Advice Form 159 and Form 159-W Regulatory Fee Worksheet

Block (22) - Applicant TIN

13-3512006

Please Verify

TIN and FRN

Block (21) - Applicant FRN - CORESID

0004244823

Block (23A) - FCC Call Sign/Other ID

[Filter 499 ID] - [Fee Year]

821256-2002

Block (24A) - Payment Type Code

0272

Block (25A) - Quantity

[Your regulatory fee base]

\$0.00

Block (27A) - Total Fee

\$0.00

Block (28A) - FCC CODE 1

[Interstate & Intl. end-user revenues]

\$0.00

Block (29A) - FCC CODE 2

[excluded interstate end-user revenues]

\$0.00

FCC Form 159-W Regulatory Fee Worksheet (based on your FCC Form 499-A filing)

Calendar year 2001 revenue information shown in whole dollars

1	Service provided by U.S. carriers that both originates and terminates in foreign points. FCC Form 499-A Line 412 (e)	\$0.00
2	Interstate end-user revenues from all telecommunications services. FCC Form 499-A Line 420 (d)	\$133,840.99 \$0.00
3	International end-user revenues from all telecommunications services except international-to-international. FCC Form 499-A Line 420 (e)	\$2,015.00 \$0.00
4	Total interstate and international end-user revenues (Sum of Lines 1, 2 and 3) Note: also enter this number on Block (28A) - "FCC Code 1".	\$135,855.99 \$0.00
5	End-user interstate mobile service monthly and activation charges. FCC Form 499-A Line 409 (d)	\$0.00
6	End-user international mobile service monthly and activation charges. FCC Form 499-A Line 409 (e)	\$0.00
7	End-user interstate mobile service message charges including roaming charges but excluding toll charges. FCC Form 499-A Line 410 (d)	\$0.00
8	End-user international mobile service message charges including roaming charges but excluding toll charges. FCC Form 499-A Line 410 (e)	\$0.00
9	End-user interstate satellite service. FCC Form 499-A Line 416 (d)	\$0.00
10	End-user international satellite service. FCC Form 499-A Line 416 (e)	\$0.00
11	Surcharges on mobile and satellite services identified as recovering universal service contributions and included in Line 403 (d) or 403 (e) on your FCC Form 499-A. [Note: you may not include surcharges applied to local or toll services, nor any surcharges identified as intrastate surcharges.]	\$0.00
12	Interstate and international revenues from resellers that do not contribute to USF. Form 499-A Line 511 (b)	\$135,855.99 \$0.00
13	Total excluded end-user revenues. (Sum Lines 5 through 12.) Note: also enter this number on Block (29A) - "FCC Code 2"	\$135,855.99 \$0.00
14	Total subject revenues. (Line 4 minus Line 13) Note: also enter this number on Block (25A) - "Quantity"	0 \$0.00
15	Interstate telephone service provider fee factor	0.00153
16	2001 Regulatory Fee (Line 14 times Line 15)* Note: also enter this number on Block (27A) - "Total Fee"	\$0.00

* You are exempt if you owe less than \$10 for all FCC reg. fees. If the above figures are correct, you may certify and use this page in lieu of completed Forms 159 & 159-W.

Block (30) -

I, FRANCESCO OLIVA CERTIFY under penalty of perjury that the foregoing and supporting information is true and correct to the

(please print)

best of my knowledge, information and belief. (Signature) FRANCESCO OLIVA (Date) 8/16/2002

☐ MasterCard ☐ Visa ☐ Discover ☐ AmEx Credit Card # _____ Expir. Date _____

I hereby authorize the FCC to charge my credit card above for the services/authorizations herein described

<See Public Notice for other payment options.> (Signature) _____ (Date) ____/____/2002

If the above revenue data does not correspond to your 499-A filing, please contact the Form 499 Data Collection Agent at 973-560-4460

Attention: Filing must be received by September 25, 2002. See Public Notice.

FCC FORM 159-W

July 2001

7002 0860 0006 2254 7571

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$ 60	
Certified Fee	2.30	
Return Receipt Fee (Endorsement Required)	1.75	
Restricted Delivery Fee (Endorsement Required)	—	
Total Postage & Fees	\$	

FORM 159W

Sent To FCC CORES ADMINISTRATOR

Street, Apt. No.; or PO Box No. 445 12th ST. SW

City, State, ZIP+ 4 WASH. D.C. 20554

PS Form 3800, April 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 FCC
 CORES ADMINISTRATOR
 Room CY-C140
 445 12th ST. SW
 WASH. D.C. 20554
 Form 159W

2. Article Number
(Transfer from service label)

7002 0860 0006 2254 7571

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* B. Date of Delivery

C. Signature

X

☐ Agent
☐ Addressee
☒ Yes
☐ No

D. Is delivery address different from the address on the mailpiece?
 If YES, enter delivery address below:

AUG 26 2002

3. Service Type
☐ Certified Mail ☒ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes



60 East 56th Street, 9th Flr
New York, NY 10022
Tel: 212.758.3283
Fax: 212.758.3453
www.eagletelco.com

August 5, 2002

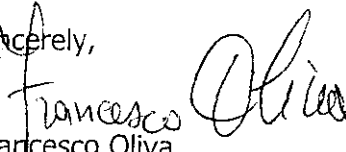
Universal Service Administrative Company
Billing and Disbursement
12902 Federal Systems Park Drive
Fairfax, Virginia 22033-4412

To Whom It May Concern:

This is in response to your July 31, 2002 letter. On July 12, 2002 Eagle Communications, Inc. (ECI), sent a letter with a check for the amount of \$3,897.72 for the billing periods of April 1, 2002 through July 1, 2002. In addition, it was stated that the original Form 499-A submitted April 1, 2002 incorrectly reported the total local revenues as Interstate for the annual amount of \$4,596,533.43. The new Form 499-A for ECI was filed on July 9, 2002. This new submission reported correctly the total interstate and international revenues of \$135,855.99.

I hope this letter clarifies ECI's reported interstate and international revenues for the USF.

If you have any questions, I can be reached at 212.758.3283 ext. 3061.

Sincerely,

Francesco Oliva
Manager-Regulatory Affairs

Attachments



Universal Service Administrative Company

Collections Department

July 31, 2002

Eagle Communications, Inc.
60 E. 56th St. 9th Floor
New York, NY 10022

RE: Filer 499 ID 821256

Dear Eagle Communications, Inc.:

Our records indicate that as of July 26, 2002, your account is currently sixty days past due. Your account balance that is now past due totals \$143,281.58.

Your payment is your contribution to the Universal Service Fund as mandated by the Telecommunications Act of 1996 and the FCC Rule CFR 54.709 - 54.713. As stated in 54.713, "failure to file the Universal Service Worksheet or to submit required quarterly contributions may subject the contributor to the enforcement provisions of the Act and any other applicable law."

If your account becomes ninety days past due, your disbursement profile will be set to "Force Net". All disbursements that you currently receive will be offset against your USAC Billing and Disbursement Invoice and appear as disbursement credits.

If you have already mailed this payment, we apologize for the inconvenience and you may disregard this notice. If you have neglected to send payment, we ask that you do so immediately.

If you believe that we have received your payment, but the payment has not been posted to your account, please send an email to eusac.ar@us.pwcglobal.com. Include your Company Name, Filer 499 ID, payment date, and payment type (Check, ACH or Wire). If the payment was for multiple Filer 499 IDs, send the USAC Payment Identification Form.

Your account is currently accruing late payment fees and will continue to do so until we receive your payment.

Sincerely,

USAC Collections Department



60 East 56th Street, 9th Flr
New York, NY 10022
Tel: 212.758.3283
Fax: 212.758.3453
www.eagletelco.com

July 12, 2002

To: Universal Service Administrative Company

From: Eagle Communications, Inc. – Filer 499 ID # 821256

Re: Payment for USF

To Whom It May Concern:

Enclosed is \$3,897.72 for Eagle Communications, Inc's 4 (four) month contribution to the Universal Service Fund. The billing period is April 1, 2002 through July 1, 2002. Please note the annual difference of \$4,460,677.44 based on the revised 499-A form submitted on July 9, 2002. The previous 499-A submittal of April 1, 2002 incorrectly reported the total local revenues as Interstate for the annual amount of \$4,596,533.43. The new figures are based on the total Interstate and International revenues of \$135,855.99 and calculated with a FCC contribution factor of 0.072805.

If you have any questions, I can be reached at 212.758.3283 ext. 3061

Sincerely,

Francesco S. Oliva

Manager – Regulatory Affairs

003028

OUR REF. NUMBER	YOUR INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT PAID	DISCOUNT TAKEN	NET CHECK AMOUNT
-----------------	---------------------	--------------	----------------	-------------	----------------	------------------

003968	Filer ID: 82125	7/10/02	3897.72	3897.72	0.00	3897.72
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EAGLE COMMUNICATIONS, INC.

60 EAST 56TH STREET
9TH FLOOR
NEW YORK, NY 10022

CITIBANK, N.A. BR. 9
NEW YORK, NY 10022
1-8/210

003028

CHECK DATE	CONTROL NUMBER	AMOUNT
07/11/2002	003028	\$ *****3897.72

PAY Three Thousand Eight Hundred Ninety-Seven and 72/100----- Dollars

TO THE
ORDER
OF
UNIVERSAL SERVICE Administrative Company

David Maddole
AUTHORIZED SIGNATURE

SECURITY FEATURES INCLUDED. DETAILS ON BACK.

⑈003028⑈ ⑆021000089⑆ 31735069⑈

EAGLE COMMUNICATIONS, INC.

003028

Vendor ECI830 Check Date 07/11/2002 Check Number 003028

ef Nbr	Inv Nbr	Inv Date	Invoice Amount	Amount Paid	Disc Taken	Net Check Amt
03968	Filer ID: 82125	7/10/02	3897.72	3897.72	0.00	3897.72

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

UNIVERSAL SERVICE
ADMINISTRATIVE COMPANY
135 S. LA SALLE, DEPT. 1259
CHICAGO, ILLINOIS
60674-1259

2. Article Number

(Transfer from service label)

7002 0860 0002 1461 8207

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

E. J. Hansen

C. Signature

X

☐ Agent
☒ AddresseeD. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☒ No

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

Sent To

UNIVERSAL SERVICE ADMINISTRATIVE CO.

Street, Apt. No.,
or PO Box No.

135 S. LA SALLE, DEPT. 1259

City, State, ZIP+4

CHICAGO, ILLINOIS 60674-1259

PS Form 3800, April 2002

See Reverse for Instructions

7540 2254 9000 0860 0006 7002

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$		Postmark Here
Certified Fee		2.30	
Return Receipt Fee (Endorsement Required)		1.75	
Restricted Delivery Fee (Endorsement Required)			
Total Postage & Fees	\$		

Sent To UNIVERSAL SERVICE ADM. CO.
Street, Apt. No., or PO Box No. 12902 FEDERAL SYSTEMS PARK DRIVE
City, State, ZIP+4 FAIRFAX, VA. 22033-4412
 PS Form 3800, April 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

UNIVERSAL SERVICE ADM. COMPANY
 12902 FEDERAL SYSTEMS
 PARK DRIVE
 FAIRFAX, VA 22033-4412

2. Article Number

(Transfer from service label)

7002 0860 0006 2254 7540

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

x *Andres J. J. J.*

☐ Agent
☐ Addressee

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes
☒ No

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes



60 East 56th Street, 9th Flr
New York, NY 10022
Tel: 212.758.3283
Fax: 212.758.3453
www.eagletelco.com

July 12, 2002

To: Universal Service Administrative Company

From: Eagle Communications, Inc. – Filer 499 ID # 821256

Re: Payment for USF

To Whom It May Concern:

Enclosed is \$3,897.72 for Eagle Communications, Inc's 4 (four) month contribution to the Universal Service Fund. The billing period is April 1, 2002 through July 1, 2002. Please note the annual difference of \$4,460,677.44 based on the revised 499-A form submitted on July 9, 2002. The previous 499-A submittal of April 1, 2002 incorrectly reported the total local revenues as Interstate for the annual amount of \$4,596,533.43. The new figures are based on the total Interstate and International revenues of \$135,855.99 and calculated with a FCC contribution factor of 0.072805.

If you have any questions, I can be reached at 212.758.3283 ext. 3061

Sincerely,

Francesco S. Oliva
Manager – Regulatory Affairs

EAGLE COMMUNICATIONS, INC.

003028

OUR REF. NUMBER	YOUR INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT PAID	DISCOUNT TAKEN	NET CHECK AMOUNT
003968	Filer ID:82125	7/10/02	3897.72	3897.72	0.00	3897.72

EAGLE COMMUNICATIONS, INC.

60 EAST 56TH STREET
9TH FLOOR
NEW YORK, NY 10022

CITIBANK, N.A. BR. 9
NEW YORK, NY 10022
1-8/210

003028

CHECK DATE	CONTROL NUMBER	AMOUNT
07/11/2002	003028	\$ *****3897.72

PAY Three Thousand Eight Hundred Ninety-Seven and 72/100----- Dollars

OTHER
ORDER
OF
UNIVERSAL SERVICE Administrative Company

David Maddule
AUTHORIZED SIGNATURE

SECURITY FEATURES INCLUDED. DETAILS ON BACK.

⑈003028⑈ ⑆021000089⑆ 31735069⑈

EAGLE COMMUNICATIONS, INC.

003028

Vendor	ECI830	Check Date	07/11/2002	Check Number	003028	
<u>Ref Nbr</u>	<u>Inv Nbr</u>	<u>Inv Date</u>	<u>Invoice Amount</u>	<u>Amount Paid</u>	<u>Disc Taken</u>	<u>Net Check Amt</u>
003968	Filer ID:82125	7/10/02	3897.72	3897.72	0.00	3897.72

7002 0860 0002 1461 8207

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

O F F I C I A L U S E

Postage	\$
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

Sent To UNIVERSAL SERVICE ADMINISTRATIVE CO.
Street, Apt. No., or PO Box No. 135 S. LA SALLE, DEPT. 1259
City, State, ZIP+4 CHICAGO, ILLINOIS 60674-1259
PS Form 3800, April 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

UNIVERSAL SERVICE
ADMINISTRATIVE COMPANY
135 S. LA SALLE, DEPT. 1259

CHICAGO, ILLINOIS
60674-1259

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) E. J. Hanson B. Date of Delivery 12/12/01
C. Signature X ☐ Agent ☐ Addressee
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7002 0860 0002 1461 8207
(Transfer from service label)

Form 499A

499 Filer ID 821256

2000 FCC Form 431 TRS-Fund Worksheet

Please read instructions before completing. Report actual amounts billed to customers and carriers during the year without subtracting uncollectibles or international settlement payments. Report revenues in whole dollars. Do not report negative amounts.

Approved by OMB

3060-0536

Avg. Est. Burden Per Respondent: 2 Hrs.

Block 1: Carrier Identification		TRS Company Code
1 Legal name of carrier	Eagle Communications, Inc.	
2 IRS employer identification number	13 3012006	
3 Name carrier is doing business as		
4 Principal communications business (check the one that best describes filer - see instructions)		
<input type="checkbox"/> Incumbent LEC	<input checked="" type="checkbox"/> CAP/CEC	<input type="checkbox"/> Pay Telephone Service Provider
<input type="checkbox"/> Cellular/PCS/SMR (wireless telephony)	<input type="checkbox"/> Local Reseller	<input type="checkbox"/> Other Local
<input type="checkbox"/> IXC	<input type="checkbox"/> Paging & Messaging	<input type="checkbox"/> SMR (dispatch)
<input type="checkbox"/> Satellite	<input type="checkbox"/> OSP	<input type="checkbox"/> Wireless Data
<input type="checkbox"/> Toll Reseller	<input type="checkbox"/> Other Toll	<input type="checkbox"/> Other Mobile
<input type="checkbox"/> Pre-paid Card	If Other Local, Other Mobile or Other Toll is checked, describe carrier type below.	

Block 2: Carrier Revenue Data for Calendar Year 2000

Note: Enter a figure for all revenue elements. Enter a '0' if none.	Gross Telecommunications Revenues (a)	% Interstate (b)	Interstate Revenues (c)
Local Services			
5 Local exchange service	\$ 4,163,454	102.209%	102,209.00
6 Local private line service	\$	%S	
7 Mobile radio, cellular, paging & PCS	\$	%S	
8 Other Local	\$	%S	
Access Services (only includes services that local exchange carriers provide to toll carriers under access tariffs)			
9 Interstate access	\$ 4,163,454	100 %S	4,163,454
10 Intrastate access	\$	0 %S	
Long Distance Services (most long distance revenue belongs on line 13)			
11 Operator service, card & pay telephone	\$	%S	
12 Non-operator switched toll service	\$	%S	
13 Long distance private line service	\$	%S	
14 All other long distance	\$ 102,209	100 %S	102,209
15 Total lines 5 through 14	\$ 4,163,454		102,209

Block 3: Calculation of Contribution

16 Interstate Revenues from line 15 c	\$ 102,209
17 Contribution Rate:	0.00038
18 Total CONTRIBUTION for April 2000 through March 2001 (line 16 x line 17) (The minimum contribution is \$100. Do not enter less than \$100.)	\$ 10,624.46607
19 Contribution to be paid this month: (Enter the amount from line 18 if it is less than \$1200. Otherwise, the contributor may divide the amount on line 18 by 12.0 to calculate equal monthly contributions.) Check here for monthly billing reminders <input checked="" type="checkbox"/>	\$ 38.84
20 This filing is:	<input checked="" type="checkbox"/> Original filing <input type="checkbox"/> Revised filing

Complete page 2

PERSONS MAKING WILLFUL FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER THE COMMUNICATIONS ACT, 47 U.S.C. 220(e)

BTCH # 001196

VO # 002999

GL # 2099 000-00-

FCC 431
March 1999

1999 FCC Form 431 TRS Fund Worksheet

Page 2

Block 4: Additional Carrier Identification Information

TRS Company Code

- 21 Holding company (if two or more affiliates must file)
- 22 Management company (if carrier is managed by another entity)
- 23 Principal CIC code used for interexchange service
- 24 Complete mailing address of carrier corporate headquarters
- 25 Telephone # for customer inquiries

Block 5: Contact Information

- 26 Name of contact person *Annie Kwok*
- 27 Telephone number of contact person *(212) - 758-3283*
- 28 Fax number of contact person *(212) - 751-8934*
- 29 E-mail address of contact person *akwok@eagle.net*
- 30 Complete mailing address of contact:
(Filing information and future Telecommunications
Relay Service Worksheets will be sent to this address.)
*60 E 56th St 9th Floor
New York NY 10022*
- 31 Billing address:
(Bills for Telecommunications Relay Service
contributions will be sent to this address.)
same as above

Block 6: CERTIFICATION: to be signed by an officer of the carrier

I certify that I am an officer of the above-named carrier, that I have examined the foregoing report and to the best of my knowledge, information and belief, all statements of fact contained in this Worksheet are true and that said Worksheet is an accurate statement of the affairs of the above-named carrier for the previous calendar year.

- 32 Signature *Annie Kwok*
- 33 Printed name of officer *Annie Kwok*
- 34 Position with carrier *Accounting Manager*
- 35 Date *10/15/01*
- 36 This filing is: ☒ Original filing ☐ Revised filing

Mail checks to: NECA TRS P.O. Box 360090 Pittsburgh, PA 15251-8090. For additional information call NECA 973-884-8173
Mail worksheet and photocopy of checks to: NECA - FCC TRS Fund Administration 100 South Jefferson Rd. Whippany, NJ 07981

PERSONS MAKING WILLFUL FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT
UNDER THE COMMUNICATIONS ACT, 47 U.S.C. 220(e)

Notice: Section 64.604(c)(4)(ii) of the Commission's Rules requires all carriers providing interstate telecommunications service to complete this worksheet and to contribute funding for interstate Telecommunications Relay Services (TRS). The collection of information and fees stems from the Commission's authority under the Communications Act of 1934, Sections 4, 48 Stat. 1066, as amended, 47 U.S.C. 154 unless otherwise noted. Interpret or apply Sections 201, 211, 218, 219, 220, 225, 48 Stat. 1073, 1077, as amended; 47 U.S.C. Sections 201, 211, 218, 219, 220, 225. The data in the report will be used to ensure that carriers properly fund interstate TRS. Selected information provided in the worksheet will be made available to the public in a manner consistent with the Commission's Rules. All carriers providing interstate telecommunications service must file this worksheet. Other telecommunications carriers may voluntarily file this worksheet.

Remember - You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid Office of Management and Budget (OMB) control number. This collection has been assigned an OMB control number of 3060-0536.

We have estimated that each response to this collection of information will take, on average, 2 hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain the required data, and actually complete and review the form or response. If you have any comments on this estimate, or how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERM, Washington, D.C. 20554, Paperwork Reduction Project (3060-0536). We also will accept your comments via Internet if you send them to jboley@fcc.gov. Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS.

The foregoing Notice is required by the Privacy Act of 1974, P.L. 93-579, December 31, 1994, 5 U.S.C. 552a(e)(3), and the Paperwork Reduction Act of 1995, P.L. 104-13, 44 U.S.C. Section 3501.

The Commission is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this form. We will use the information that you provide to determine contribution amounts. If we believe there may be a violation or potential violation of a statute or a Commission regulation, rule or order, your form may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation, or order. In certain cases, the information in your Form may be disclosed to the Department of Justice, court, or other adjudicative body when (a) the Commission; or (b) any employee of the Commission; or (c) the United States government, is a party to a proceeding before the body or has an interest in the proceeding.

If you owe a past due debt to the federal government, the taxpayer identification number (such as your social security number and other information you provide also may be disclosed to the Department of the Treasury Financial Management Service, other Federal agencies, and/or your employer to offset your salary, IRS tax refund, or other payments to collect that debt. The Commission also may provide this information to those agencies through the matching of computer records where authorized.

With the exception of your social security number, if you do not provide the information we request on the Worksheet, the Commission may consider you

Eagle Communications, Inc.

TRS Fund Apr'00-Mar'01

	Gross Sales	is-	Taxable	ble	Tax Due	
Jun-00	\$ 524,852.55	\$	443,850.54	\$	168.64	0.00038
Jul-00	\$ 529,343.95	\$	445,829.20	\$	169.40	0.00038
Aug-00	\$ 515,965.65	\$	419,104.97	\$	159.19	0.00038
Sep-00	\$ 571,171.90	\$	477,151.66	\$	181.23	0.00038
Oct-00	\$ 505,584.36	\$	416,737.91	\$	158.30	0.00038
Nov-00	\$ 490,780.84	\$	400,212.87	\$	152.05	0.00038
Dec-00	\$ 484,346.54	\$	395,615.12	\$	150.28	0.00038
Jan-01	\$ 499,237.05	\$	409,980.34	\$	155.73	0.00038
Adj.	\$ (650.00)	\$	(650.00)	\$	(0.26)	0.00040
Feb-01	\$ 501,322.79	\$	407,771.18	\$	154.91	0.00038
Adj.	\$ (17,803.55)	\$	(17,803.55)	\$	(7.12)	0.0004
Mar-01	\$ 459,878.67	\$	366,664.65	\$	139.32	0.00038
Adj.	\$ (1,011.12)	\$	(1,011.12)	\$	(0.40)	0.00040
	\$ 5,063,019.63	\$	4,163,453.77	\$	1,581.27	
LongDistance for 2000	\$ 72,545.27	\$	72,545.27	\$	28.97	0.00040
LongDistance for 2001	\$ 29,664.35	\$	29,664.35	\$	11.27	0.00038
	\$ 102,209.62	\$	102,209.62	\$	40.24	
Grand Total	\$ 5,165,229.25	\$	4,265,663.39	\$	1,621.51	

CostguardBilling Date

2/01/01

Jan-01

Feb-01

01-Mar

IL \$ 10,178.48 \$ 9,202.55 \$ 10,283.34 \$ 29,664.35

SEP.-03'02(TUE) 10:26
EAGLE COMMUNICATIONS, INC.

EAGLE COMMUNICATIONS

TEL:1 212 758 3453

P.005
002298

OUR REF NUMBER	YOUR INVOICE NUMBER	INVOICE DATE	INVOICE AMOUNT	AMOUNT PAID	DISCOUNT TAKEN	NET CHECK AMOUNT
002999	EIN:13-3512006	10/16/01	1621.00	1621.00	0.00	1621.00

EAGLE COMMUNICATIONS, INC.

60 EAST 56TH STREET
9TH FLOOR
NEW YORK, NY 10022


CITIBANK, N.A. BR. 8
NEW YORK, NY 10022
1-8/210

002298

CHECK DATE	CHECK NUMBER	AMOUNT
10/16/2001	002298	\$ *****1621.00

PAY One Thousand Six Hundred Twenty-One and 00/100----- Dollars

NECA TRS
TO THE P.O. BOX 360090
ORDER OF PITTSBURGH, PA 15251-6090


AUTHORIZED SIGNATURE

SECURITY FEATURES INCLUDED. DETAILS ON BACK.

⑈002298⑈ ⑆0210000089⑆ 31735069⑈

EAGLE COMMUNICATIONS, INC.

002298

Eagle Communications, Inc.

Telephone Revenue for 2000.xls

	<u>1st Quarter'00</u>	<u>2nd Quarter'00</u>	<u>3rd Quarter'00</u>	<u>4st Quarter'00</u>	<u>Total Per State</u>
Telephone Revenue for FL	\$ 175,092.49	\$ 130,155.26	\$ 203,277.56	\$ 148,670.79	\$ 657,196.10
Telephone Revenue for GA	\$ 22,809.29	\$ 49,131.93	\$ 14,159.99	\$ 28,450.13	\$ 114,551.34
Telephone Revenue for MA	\$ 20,574.08	\$ 21,091.63	\$ 21,344.31	\$ 16,618.95	\$ 79,628.97
Telephone Revenue for NC	\$ 197,145.04	\$ 195,853.88	\$ 201,505.73	\$ 192,634.60	\$ 787,139.25
Telephone Revenue for NY	\$ 487,037.21	\$ 458,057.56	\$ 545,428.86	\$ 377,748.86	\$ 1,868,272.49
Telephone Revenue for TN	\$ 490,851.64	\$ 539,821.23	\$ 465,144.36	\$ 499,741.86	\$ 1,995,559.09
Telephone Revenue for IL	\$ -	\$ -	\$ 269.18	\$ -	\$ 269.18
Total	\$ 1,393,509.75	\$ 1,394,111.49	\$ 1,451,129.99	\$ 1,263,865.19	\$ 5,502,616.42

Eagle Communications, Inc.

TRS Fund Apr'00-Mar'01

	Gross Sales	Gross-NYS	Taxable	Taxable-NYS	Tax Due	
Jun-00	\$ 524,852.55	\$ 176,445.04	\$ 443,850.54	\$ 149,046.76	\$ 168.64	0.000379948
Jul-00	\$ 529,343.95	\$ 194,963.23	\$ 445,829.20	\$ 165,866.46	\$ 169.40	0.000379966
Aug-00	\$ 515,965.65	\$ 180,333.58	\$ 419,104.97	\$ 150,190.79	\$ 159.19	0.000379833
Sep-00	\$ 571,171.90	\$ 173,308.05	\$ 477,151.66	\$ 143,681.01	\$ 181.23	0.000379816
Oct-00	\$ 505,584.36	\$ 167,491.78	\$ 416,737.91	\$ 143,986.92	\$ 158.30	0.000379855
Nov-00	\$ 490,780.84	\$ 164,242.61	\$ 400,212.87	\$ 138,598.46	\$ 152.05	0.000379923
Dec-00	\$ 484,346.54	\$ 163,317.87	\$ 395,615.12	\$ 137,846.14	\$ 150.28	0.000379864
Jan-01	\$ 499,237.05	\$ 150,094.39	\$ 409,980.34	\$ 124,066.83	\$ 155.73	0.000379847
Adj.	\$ (650.00)		\$ (650.00)		\$ (0.26)	0.00040
Feb-01	\$ 501,322.79	\$ 159,708.61	\$ 407,771.18	\$ 119,185.56	\$ 154.91	0.000379894
Adj.	\$ (17,803.55)	\$ (17,803.55)	\$ (17,803.55)	\$ (17,803.55)	\$ (7.12)	0.00039992
Mar-01	\$ 459,878.67	\$ 152,977.50	\$ 366,664.65	\$ 65,595.50	\$ 139.32	0.000379966
Adj.	\$ (1,011.12)		\$ (1,011.12)		\$ (0.40)	0.00040
	\$5,063,019.63	\$1,665,079.11	\$ 4,163,453.77		\$ 1,581.27	
for 2000	\$ 72,545.27		\$ 72,545.27		\$ 28.97	0.00040
for 2001	\$ 29,664.35		\$ 29,664.35		\$ 11.27	0.00038
	\$ 102,209.62	\$3,330,158.22	\$ 102,209.62	\$ 1,320,260.88	\$ 40.24	
rand Tota	\$5,165,229.25		\$ 4,265,663.39		\$ 1,621.51	